

## UNITED STATES PATENT AND TRADEMARK OFFICE



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| APPLICATION NO.                          | FILING DATE    | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO.     | CONFIRMATION NO. |
|------------------------------------------|----------------|----------------------|-------------------------|------------------|
| 09/737,540                               | 12/15/2000     | Jae-Hoon Lee         | SAM-134                 | 9736             |
| 7                                        | 590 08/23/2004 |                      | EXAMINER                |                  |
| MILLS & ONELLO, LLP ELEVEN BEACON STREET |                |                      | KANG, DONGHEE           |                  |
| SUITE 605                                | CON STREET     |                      | ART UNIT                | PAPER NUMBER     |
| BOSTON, MA                               | A 02108        |                      | 2811                    |                  |
|                                          |                |                      | DATE MAILED: 08/23/2002 | 1                |

Please find below and/or attached an Office communication concerning this application or proceeding.

|                                                                                                                                                                                                                                                                                                                                                          | Application No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Applicant(s)                                            |                                          |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------|--|--|
| Advisory Action                                                                                                                                                                                                                                                                                                                                          | 09/737,540                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | LEE ET AL.                                              |                                          |  |  |
| ·                                                                                                                                                                                                                                                                                                                                                        | Examiner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Art Unit                                                |                                          |  |  |
|                                                                                                                                                                                                                                                                                                                                                          | Donghee Kang                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 2811                                                    |                                          |  |  |
| The MAILING DATE of this communication appe                                                                                                                                                                                                                                                                                                              | ars on the cover sheet with the c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | orrespondence add                                       | ress                                     |  |  |
| THE REPLY FILED 09 August 2004 FAILS TO PLACE Therefore, further action by the applicant is required to a final rejection under 37 CFR 1.113 may only be either: (1 condition for allowance; (2) a timely filed Notice of Appears Examination (RCE) in compliance with 37 CFR 1.114.                                                                     | void abandonment of this application in the same of th | cation. A proper rep<br>ch places the applic            | oly to a cation in                       |  |  |
| PERIOD FOR RE                                                                                                                                                                                                                                                                                                                                            | PLY [check either a) or b)]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                         |                                          |  |  |
| a) The period for reply expiresmonths from the mailing of the period for reply expires on: (1) the mailing date of this Adverse, will the statutory period for reply expire later the ONLY CHECK THIS BOX WHEN THE FIRST REPLY WAS 706.07(f).                                                                                                            | isory Action, or (2) the date set forth in the an SIX MONTHS from the mailing date of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | the final rejection.                                    |                                          |  |  |
| Extensions of time may be obtained under 37 CFR 1.136(a). The dathave been filed is the date for purposes of determining the period of extens 37 CFR 1.17(a) is calculated from: (1) the expiration date of the shortened (b) above, if checked. Any reply received by the Office later than three moleaned patent term adjustment. See 37 CFR 1.704(b). | sion and the corresponding amount of the<br>statutory period for reply originally set in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | fee. The appropriate ext<br>the final Office action; or | tension fee under<br>(2) as set forth in |  |  |
| 1. A Notice of Appeal was filed on Appellant's 37 CFR 1.192(a), or any extension thereof (37 CFR                                                                                                                                                                                                                                                         | s Brief must be filed within the p<br>R 1.191(d)), to avoid dismissal o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | period set forth in of the appeal.                      |                                          |  |  |
| 2. The proposed amendment(s) will not be entered be                                                                                                                                                                                                                                                                                                      | ecause:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                         |                                          |  |  |
| (a) $oxed{\boxtimes}$ they raise new issues that would require further                                                                                                                                                                                                                                                                                   | er consideration and/or search (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | see NOTE below);                                        |                                          |  |  |
| (b) they raise the issue of new matter (see Note by                                                                                                                                                                                                                                                                                                      | pelow);                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                         |                                          |  |  |
| (c) they are not deemed to place the application i issues for appeal; and/or                                                                                                                                                                                                                                                                             | n better form for appeal by mat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | erially reducing or s                                   | simplifying the                          |  |  |
| (d) they present additional claims without canceling a corresponding number of finally rejected claims.                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                         |                                          |  |  |
| NOTE: Newly added limitation would require furt                                                                                                                                                                                                                                                                                                          | her search and consideration.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                         |                                          |  |  |
| 3. Applicant's reply has overcome the following rejection                                                                                                                                                                                                                                                                                                | tion(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                         |                                          |  |  |
| 4. Newly proposed or amended claim(s) would canceling the non-allowable claim(s).                                                                                                                                                                                                                                                                        | be allowable if submitted in a s                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | eparate, timely file                                    | d amendment                              |  |  |
| 5. ☐ The a) ☐ affidavit, b) ☐ exhibit, or c) ☐ request fo application in condition for allowance because:                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | sidered but does NO                                     | OT place the                             |  |  |
| 6. The affidavit or exhibit will NOT be considered becaused by the Examiner in the final rejection.                                                                                                                                                                                                                                                      | cause it is not directed SOLELY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | to issues which we                                      | ere newly                                |  |  |
| 7. For purposes of Appeal, the proposed amendment explanation of how the new or amended claims we                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                         | and an                                   |  |  |
| The status of the claim(s) is (or will be) as follows:                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                         |                                          |  |  |
| Claim(s) allowed:                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                         |                                          |  |  |
| Claim(s) objected to:/.                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                         |                                          |  |  |
| Claim(s) rejected: 1-6,8,9 and 18-25.                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                         |                                          |  |  |
| Claim(s) withdrawn from consideration:                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                         |                                          |  |  |
| 8. The drawing correction filed on is a) app                                                                                                                                                                                                                                                                                                             | proved or b) disapproved by                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | the Examiner.                                           |                                          |  |  |
| 9. Note the attached Information Disclosure Stateme                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                         | <i>h</i>                                 |  |  |
| 10. Other:                                                                                                                                                                                                                                                                                                                                               | , - F ( <del>-</del> /-)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | - King                                                  | pyle                                     |  |  |
| <u> </u>                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | DONGHE<br>PRIMARY                                       | =FKANG                                   |  |  |
|                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                         |                                          |  |  |